



## Enrollment Agreement

### Student Information

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Last First Middle

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Tshirt Size: \_\_\_\_\_

### Parent Information

Mother/Guardian

Father/Guardian

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

### Medical Information

Do you have any medical problems? Yes / No Please explain: \_\_\_\_\_

Are you on any medications? Yes / No Please list: \_\_\_\_\_

Do you have medical insurance? Yes / No Company: \_\_\_\_\_ Policy No. \_\_\_\_\_

**I hereby give my permission to The Academies to have my child treated in case of any emergency situation.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Enrollment Agreement

Student Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Hold Harmless and Liability Release and Waiver

I, \_\_\_\_\_ (parent/guardian), have voluntarily submitted my application for registration of my child as a student in The Academies. By submitting the application for membership, I certify that I am fully aware of and understand the inherent dangers in participating in the activities involving Taekwondo and dance, and of the basic rules and procedures, including, but not limited to, promotional rank testing, summer camps, and tournaments which my child might attend.

I understand and agree that the members of New Life Church or The Academies (including Christian Black Belt Academy, Christian Dance Academy and Christian Music Academy), its owners/board members, the instructors, or any other student, will not be responsible for my child's safety, nor will any of these parties or individuals serve as a guardian for my child's safety during this program.

I understand and agree that neither the members of New Life Church or The Academies (including Christian Black Belt Academy, Christian Dance Academy and Christian Music Academy), its owners/board members, the instructors, or any other student, their agents or assigns, or any other individual or entity associated with The Academies, may be held liable in any way for any occurrence or event in connection with my child's membership or participation in tournaments or camps which may result in injury, death, or any and all damages to me or to my family, descendants, heirs, or assigns.

I understand and agree that in consideration of being allowed to be a student in this program including tournaments or summer camps, I hereby personally assume any and all risks involved in connection with same; and furthermore, I release forever the aforementioned individuals and entities and any other individual or entity associated with this program, for any harm, injury, or damage that may occur to my child or befall my child while he/she is a student in this program, including any and all risks connected therewith, whether foreseen or unforeseen, including any risks created and/or harm caused by any negligent act (excluding gross negligence or reckless behavior) or acts of any or all of the above-mentioned parties. Furthermore, I will hold harmless the above-mentioned parties from any claim by me, my family, my estate, my heirs, my personal representatives, or their assigns, arising out of my child's participation in the program, tournaments, or summer camps.

I further state that I am of lawful age and legally competent to sign this agreement, and that my signing this agreement is my own free act. I also understand and agree that the terms herein are contractual, and they are not a mere recital or simply for information purposes.

I understand this program is a Christian based program, which will use Bible Scripture to motivate, enrich and encourage the student in their development.

I have read, understood, and fully informed myself of the contents of this agreement. I assume my own responsibility for my child's physical condition and capability to perform under the summer camp, programs or tournaments in which he/she may participate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

### **Office Use Only**

#### **Enrollment Checklist – CBBA / CDA / CMA / Fun Zone**

Enrollment Fee(s) Paid: \_\_\_\_\_

Delivered:

Uniform (size \_\_\_\_ ) \_\_\_\_\_  
Tshirt (size \_\_\_\_ ) \_\_\_\_\_  
Online Login Sheet \_\_\_\_\_  
Water Bottle \_\_\_\_\_  
Workbook/Manual \_\_\_\_\_  
Welcome Letter \_\_\_\_\_

Entered in:

Computer \_\_\_\_\_  
Email List \_\_\_\_\_  
Attendance \_\_\_\_\_



## FunZone Enrollment Agreement

Student Name: \_\_\_\_\_

<u>Check</u>	<u>Program</u>	<u>Price</u>
_____	<b>Current Enrollee</b> - Enrollment Fee - \$15 / Renewal Fee - \$0	\$10.00/week
_____	<b>Sibling of Current Enrollee</b> - Enrollment Fee - \$15 / Renewal Fee - \$0	\$15.00/week
_____	<b>Non-Enrollee</b> - Enrollment Fee - \$30 / Renewal Fee - \$0	\$20.00/week
_____	<b>Daily Drop-In</b>	\$25.00/day

**Total Weekly Fee: \$ \_\_\_\_\_ / week**

**Total Enrollment/Renewal Fee: \$ \_\_\_\_\_**

I, (parent/guardian) \_\_\_\_\_ agree that I am enrolling my child in The Academies Fun Zone as a participant in the above listed programs, for a period of **26 weeks**.

I agree that my credit/debit card will be billed in the above amount on Monday of each week, and that if payment is not made by Thursday of each week, I will be assessed a \$5 late fee per week (assessed to each week missed) until payment is made.

I agree that at the end of 26 weeks, the terms of my enrollment will continue until such time as I renew my enrollment or give two weeks written notice of cancellation.

I further agree that the Hold Harmless, Liability & Release Waiver and other terms of my previous agreement remain intact with this enrollment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

.....  
**Office Use Only**

CC#: \_\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_ CVV: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_